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DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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November 2, 2017

To: Supervisor Mark Ridley-Thomas, Chairman
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From: *for Cynthia McCoy Miller*
Brandon T. Nichols
Acting Director

PENNY LANE CENTERS FOSTER FAMILY AGENCY CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of the Penny Lane Center Foster Family Agency (the FFA) in May 2017. The FFA has three offices: one located in the First Supervisorial District; one in the Third Supervisorial District; and one in the Fifth Supervisorial District. All offices provide services to the County of Los Angeles DCFS placed children, and children from other counties. According to the FFA's Program Statement, its stated purpose is "to provide for the care, supervision and well-being of children placed with the Agency and to provide them with the kind of ongoing therapeutic services and skills training which will meet their problems and needs."

At the time of the review, the FFA supervised 661 DCFS placed children in 235 Certified Foster Homes (CFHs). The children's average length of placement was 10 months and their average age was 14.

SUMMARY

During CAD's Contract Compliance Review, the interviewed children generally reported: feeling safe in the FFA CFHs; having been provided with good care and appropriate services; being comfortable in their placement environment; and being treated with respect. The Certified Foster Parents (CFPs) reported being supported by the FFA staff in their efforts to provide care and supervision to the children placed in their homes.

The FFA was in full compliance with 7 of 11 applicable areas of CAD's Contract Compliance Review: Certified Foster Homes; Education and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; Discharged Children; and Personnel Records.

Each Supervisor
November 2, 2017
Page 2

CAD noted deficiencies in the areas of: Licensure/Contract Requirements, related to Special Incident Reports (SIRs) that were not submitted timely and not accurately documented, and Community Care Licensing Division (CCLD) citations; Facility and Environment, related to the children's rooms not being well maintained, adequate food was not maintained, and weekly monetary and monthly clothing allowance logs were not comprehensive or accurately maintained; Maintenance of Required Documentation and Service Delivery, related to FFA Social Workers not obtaining or documenting efforts to obtain DCFS Children's Social Worker's (DCFS CSW's) authorization to implement Needs and Services Plans (NSPs), Initial and Quarterly Updated NSPs were not comprehensive; and Personal Needs/Survival and Economic Well-Being, related to CFPs not encouraging and assisting children to update a Life Book.

REVIEW OF REPORT

On July 19, 2017, Ana Maria Tribble and Vanessa Stamp, DCFS CAD, and Many Adenow, DCFS Out-of-Home Care Management Division (OHCMD), held an exit conference with the FFA representatives: Judith Sandino, Program Director; Monica Smith, North Hollywood Regional Director; Charito Guerrero, Commerce Regional Director; Trisha Stewart, Antelope Valley Regional Director; and Laurie Rein, Adoption Manager. The FFA representatives agreed with the review findings and recommendations; were receptive to implementing systemic changes to improve the FFA's compliance with regulatory standards; and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

The FFA provided the attached approved CAP addressing the recommendations noted in this compliance report.

If you have any questions, your staff may contact me or Aldo Marin, Board Relations Manager at (213) 351-5530.

BTN:KR
LTI:amt

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Public Information Office
Audit Committee
Judith Sandino, Program Director, Penny Lane Centers FFA
Lenora Scott, Regional Manager, Community Care Licensing Division
Monique Turner-Marshall, Regional Manager, Community Care Licensing Division

**PENNY LANE CENTERS FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE REVIEW SUMMARY**

License Number: 197806785

License Number: 197806547

License Number: 197806410

	Contract Compliance Review	Findings: May 2017
I	<p><u>Licensure/Contract Requirements</u> (7 Elements)</p> <ol style="list-style-type: none"> 1. Timely notification for child's relocation. 2. Timely, cross-reported Special Incident Reports (SIRs). 3. Runaway procedures. 4. Community Care Licensing Division (CCLD) citations/Out-of-Home Care Management Division (OHCMD) safety reports. 5. FFA ensures complete required Whole Foster Family Home (WFFH) training. 6. FFA pays Certified Foster Parents (CFPs) WFFH payments. 7. FFA conducted an assessment of CFPs prior to placement of two or more children. 	<ol style="list-style-type: none"> 1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Improvement Needed 5. Not Applicable 6. Not Applicable 7. Full Compliance
II	<p><u>Certified Foster Homes</u> (12 Elements)</p> <ol style="list-style-type: none"> 1. Home study and safety inspection conducted prior to certification. 2. FFA's inquiry with OHCMD for historical information prior to certification. 3. Timely criminal clearances from the Federal Bureau of Investigation (FBI), California Department of Justice (DOJ), and Child Abuse Central Index (CACI), prior to certification. 4. Timely, completed, and signed criminal background statement. 5. Health screening & tuberculosis (TB) test prior to certification. 6. All required training prior to certification. 7. Certificate of approval on file including capacity. 8. Safety inspection completed at least every six months or per approved Program Statement. 9. Completed annual training hours for Re-certification and current Cardiopulmonary Resuscitation (CPR)/First-Aid/Water safety certificates. 	<p align="center">Full Compliance (All)</p>

PENNY LANE CENTERS FOSTER FAMILY AGENCY CONTRACT COMPLIANCE
 REVIEW
 PAGE 2

	<ol style="list-style-type: none"> 10. Current California Driver's License (CDL), auto insurance and annual vehicle maintenance documentation for CFPs and designated drivers. 11. Criminal clearances from the FBI, DOJ and CACI; health screening and TB test; auto insurance and current CDL for other adults in the home. 12. FFA assists CFPs in providing transportation needs. 	
<p>III</p>	<p><u>Facility and Environment</u> (7 Elements)</p> <ol style="list-style-type: none"> 1. Exterior grounds well maintained. 2. Common quarters well maintained. 3. Children's bedrooms well maintained. 4. Sufficient recreational equipment and educational resources (e.g. computer). 5. Adequate perishable and non-perishable food. 6. CFP conducted disaster drills and documentation maintained. 7. Money and clothing allowance logs maintained. 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Improvement Needed 4. Full Compliance 5. Improvement Needed 6. Full Compliance 7. Improvement Needed
<p>IV</p>	<p><u>Maintenance of Required Documentation and Service Delivery</u> (9 Elements)</p> <ol style="list-style-type: none"> 1. FFA obtained or documented efforts to obtain DCFS Children's Social Worker's (CSW's) authorization to implement Needs and Services Plans (NSPs). 2. CFPs participated in development of the NSPs. 3. Children progressed towards meeting NSP goals. 4. FFA Social Workers developed timely, comprehensive Initial NSPs with the child's participation. 5. FFA Social Workers developed timely, comprehensive Updated NSPs with the child's participation. 6. Therapeutic services received. 7. Recommended assessment/evaluations implemented. 8. DCFS CSW's monthly contacts documented. 9. FFA Social Workers conducted required visits. 	<ol style="list-style-type: none"> 1. Improvement Needed 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Improvement Needed 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance

PENNY LANE CENTERS FOSTER FAMILY AGENCY CONTRACT COMPLIANCE
 REVIEW
 PAGE 3

<p>V</p>	<p><u>Education and Workforce Readiness</u> (5 Elements)</p> <ol style="list-style-type: none"> 1. Children enrolled in school within three school days. 2. Children attended school as required and FFA facilitated in meeting the children's educational goals. 3. Children's report cards/progress reports maintained. 4. Children's academic performance and/or attendance increased. 5. FFA facilitated the children's participation in Youth Development Services (YDS) or equivalent services and vocational programs. 	<p>Full Compliance (All)</p>
<p>VI</p>	<p><u>Health and Medical Needs</u> (4 Elements)</p> <ol style="list-style-type: none"> 1. Initial medical exams conducted timely. 2. Required follow-up medical exams conducted timely. 3. Initial dental exams conducted timely. 4. Required follow-up dental exams conducted timely. 	<p>Full Compliance (All)</p>
<p>VII</p>	<p><u>Psychotropic Medication</u> (2 Elements)</p> <ol style="list-style-type: none"> 1. Current court authorization for administration of psychotropic medication. 2. Current psychiatric evaluation. 	<p>Full Compliance (All)</p>

PENNY LANE CENTERS FOSTER FAMILY AGENCY CONTRACT COMPLIANCE
 REVIEW
 PAGE 4

VIII	<p><u>Personal Rights and Social/Emotional Well-Being</u> (10 Elements)</p> <ol style="list-style-type: none"> 1. Children informed of FFA's policies and procedures. 2. Children feel safe in the Certified Foster Home (CFH). 3. CFPs' efforts to provide nutritious meals and snacks. 4. CFPs treat children with respect. 5. Children allowed private visits, calls and to receive correspondence. 6. Children free to attend or not attend religious services/activities of their choice. 7. Children's chores are reasonable. 8. Children informed about their medication and right to refuse medication. 9. Children aware of right to refuse or receive voluntary medical, dental and psychiatric care. 10. Children given opportunities to participate in extracurricular, enrichment and social activities in the CFH, school and community. 	<p>Full Compliance (All)</p>
IX	<p><u>Personal Needs/Survival and Economic Well-Being</u> (7 Elements)</p> <ol style="list-style-type: none"> 1. Clothing allowance provided in accordance with FFA Program Statement. 2. Adequate quantity and quality of clothing inventory. 3. Children involved in the selection of their clothing. 4. Routine provision of all personal care items that meet ethnic needs including towels and toiletries. 5. Minimum monetary allowances. 6. Management of allowance/earnings. 7. Encouragement and assistance with a Life Book. 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Improvement Needed
X	<p><u>Discharged Children</u> (3 Elements)</p> <ol style="list-style-type: none"> 1. Completed discharge summary. 2. Attempts to stabilize children's placement. 3. Child completed high school (if applicable) 	<p>Full Compliance (All)</p>

XI	<u>Personnel Records</u> (9 Elements) <ol style="list-style-type: none">1. Timely criminal clearances from the FBI, DOJ and CACI.2. Timely, completed and signed criminal background statement.3. FFA Social Workers met education/experience requirements.4. Timely employee health screening and TB clearances.5. Valid CDL and auto insurance.6. FFA employees signed copies of FFA policies and procedures.7. FFA employees completed all required training and documentation maintained.8. FFA Social Workers have appropriate caseload ratio.9. FFA maintained written declarations for part-time contracted FFA Social Workers caseloads not to exceed a total of 15 children.	Full Compliance (All)
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**PENNY LANE CENTERS FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE REVIEW
FISCAL YEAR 2016-2017**

SCOPE OF REVIEW

The following report is based on a "point in time" review. This compliance report addresses findings noted during the May 2017 review. The purpose of this review was to assess the FFA's compliance with its County contract. The review covered the following 11 areas:

- Licensure/Contract Requirements,
- Certified Foster Homes,
- Facility and Environment,
- Maintenance of Required Documentation and Service Delivery,
- Education and Workforce Readiness,
- Health and Medical Needs,
- Psychotropic Medication,
- Personal Rights and Social/Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being,
- Discharged Children, and
- Personnel Records.

For the purpose of this review, 12 placed children were selected for the sample. CAD interviewed ten children, as two children were too young to be interviewed. CAD reviewed the 12 children's files to assess the level of care and services they received. During the home visits, the children were observed to be comfortable and well cared for in the CFHs and the CFPs were observed to be responsive to the children's needs. Additionally, four discharged children's files were reviewed to assess the FFA's compliance with permanency efforts. At the time of the review, 11 placed children were prescribed psychotropic medication. Two of these children's files were reviewed to assess for timeliness of Psychotropic Medication Authorization and the required documentation of psychiatric monitoring.

CAD reviewed five CFP files and five staff files for compliance with Title 22 Regulations and County contract requirements. Site visits were conducted to the FFA and the CFHs to assess the quality of care and supervision provided to the placed children.

CONTRACTUAL COMPLIANCE

CAD found the following four areas out of compliance:

Licensure/Contract Requirements

- SIRs were not submitted timely or inaccurate information was reported.

PENNY LANE CENTERS FOSTER FAMILY AGENCY CONTRACT COMPLIANCE
REVIEW
PAGE 2

CAD reviewed 14 SIRs and found that three were not submitted timely, and one of them was inaccurately documented. All three SIRs were submitted two days late.

- CCLD citations.

CCLD cited the FFA on May 11, 2016, because a CFP used an inappropriate form of discipline when the CFP spanked the child on the buttocks. A Plan of Correction (POC) was requested, which required that the FFA speak with the CFP about their actions in addition to implementing a corrective action plan with the CFP. On May 16, 2016, CCLD cleared the POC. A search in the Child Welfare Services Case Management System (CWS/CMS) confirmed no Los Angeles County Emergency Response (ER) referral was associated with this CCLD citation as this was for a child placed by Orange County Children and Family Services. The CFH was placed on hold on June 19, 2016.

CCLD cited the FFA on June 7, 2016, in response to a complaint filed on February 23, 2016. It was determined that a child was grabbed and the CFP failed to supervise the child appropriately, and an adult in the home did not have a criminal record clearance. A POC was requested, which required the FFA to provide proof that the CFH was decertified and for the FFA to remind all caregivers certified by the FFA of the Criminal Record Clearance requirement. CCLD cleared the POC on June 17, 2016. DCFS ER investigated three associated referrals and substantiated the allegations of Physical Abuse and General Neglect. The Out-of-Home Care Investigation Section (OHCIS) conducted a supplemental investigation and placed the CFH on an indefinite hold on July 19, 2016; not to be used as a placement resource for DCFS placed children.

CCLD cited the FFA on June 14, 2016, in response to a complaint filed on March 2, 2016 for a CFP failing to protect a child from being mishandled and yelled at; and children being called names, subjected to humiliation, physical punishment and ridicule. A POC was requested, which required proof that the CFH was decertified on June 10, 2016. CCLD cleared the required POC on June 14, 2016. The DCFS ER substantiated the three associated referrals for Physical Abuse and General Neglect. The OHCIS conducted a supplemental investigation and placed the CFH on an indefinite hold on July 19, 2016; not to be used as a placement resource for DCFS placed children.

CCLD cited the FFA on September 15, 2016, for the late submittal of a SIR involving foster children placed in a CFH that occurred on August 11, 2016, and was submitted on August 19, 2016. A POC was requested, which required that the FFA provide training to its staff on the importance of reporting incidents timely. CCLD cleared the required POC on September 20, 2016. A search in CWS/CMS confirmed that no Los Angeles County ER referral was associated with this CCLD citation. OHCIS was not required to conduct a supplemental investigation for this citation.

CCLD cited the FFA on September 19, 2016, related to the California Code of Regulations for failing to operate in accordance with the terms specified in its Plan of Operation, which includes the FFA's Program Statement. The FFA office was not available to the public

PENNY LANE CENTERS FOSTER FAMILY AGENCY CONTRACT COMPLIANCE
REVIEW
PAGE 3

nor to CCLD on September 19, 2016. The FFA informed CCLD that the employees were working at another office location. A POC was requested, which required the FFA to operate per the terms specified in its Plan of Operation (and Program Statement). On September 26, 2016, CCLD cleared the required POC. As this citation did not involve any specific children, OHCIS was not required to conduct a supplemental investigation.

CCLD cited the FFA on October 21, 2016, in response to a complaint received on August 29, 2016, for the CFPs failing to provide adequate or appropriate levels of care and supervision, resulting in inappropriate sexual activities in the CFH. The CFPs were aware of the inappropriate sexualized behavior of one of the placed children toward one or more of the other children living in the CFH. A POC was requested, which required that the FFA provide training to the CFPs regarding the proper care and supervision to be provided to children. CCLD cleared the required POC on October 31, 2016. DCFS ER investigated an associated referral and the allegation of Sexual Abuse was found Inconclusive and allegations of Sibling At Risk were Unfounded. OHCIS conducted a supplemental investigation and determined that no further action or corrective action was required.

CCLD cited the FFA on October 21, 2016, when it was discovered that the CFPs installed a lock on the outside of a child's bedroom door in the CFH. The CFPs were aware of inappropriate sexualized behavior of one of the placed children towards one or more of the other children living in the CFH and opted to install a lock on the child's bedroom door. A POC was requested, which required that the FFA provide Personal Rights training to the CFPs. CCLD cleared the required POC on October 31, 2016. DCFS ER investigated an associated referral and deemed the allegation of Sexual Abuse as Inconclusive and allegations of Sibling At Risk as Unfounded. OHCIS conducted a supplemental investigation and determined that no further action or corrective action was required.

CCLD cited the FFA on December 2, 2016, in response to a complaint received on September 12, 2016. CCLD cited the FFA for a Care and Supervision violation as it was substantiated that the foster child in the home admitted to sexually abusing the CFP's child. The victim did not tell anyone at first due to fear of the foster child. A POC was requested which required that the FFA provide training on the supervision of foster children, and other training as deemed necessary. CCLD cleared the required POC on December 7, 2016. DCFS ER investigated an associated referral and deemed the allegation of Sexual Abuse as Inconclusive. OHCIS conducted a supplemental investigation and determined that no further action or corrective action was required.

CCLD cited the FFA on December 2, 2016, when it was learned during a complaint investigation that the placed children in the home must first ask and receive permission to use the bathroom, are not allowed to enter the kitchen, and must ask for food or drinks from the CFP. A POC was requested, which required that the FFA provide Personal Rights training to the CFP. CCLD cleared the required POC on December 12, 2016. There was no associated referral with this citation and OHCIS did not conduct a supplemental investigation.

PENNY LANE CENTERS FOSTER FAMILY AGENCY CONTRACT COMPLIANCE
REVIEW
PAGE 4

CCLD cited the FFA on January 18, 2017, during an unannounced Case Management inspection in reference to the FFA's late submittal of SIR #495746, due to CCLD on January 7, 2017, but submitted on January 12, 2017. CCLD determined that the FFA failed to report the incident to CCLD in a timely manner. The SIR involved emergency medical treatment provided to a placed child. A POC was requested, which required the FFA provide additional training in reporting requirements to the FFA staff. CCLD cleared the required POC on January 19, 2017. There was no associated referral with this citation and OHCIS did not conduct a supplemental investigation.

CCLD cited the FFA on January 18, 2017, during an unannounced Case Management inspection for the late submittal of a SIR, which was due to CCLD on January 9, 2017 and on January 12, 2017. CCLD determined that the FFA failed to report to CCLD in a timely manner. The SIR incident involved emergency medical treatment and hospitalization of a placed child. A POC was requested, which required the FFA provide additional training in reporting requirements to the CFPs and the FFA staff. CCLD cleared the required POC on January 19, 2017. There was no associated referral with this citation and OHCIS did not conduct a supplemental investigation.

CCLD cited the FFA on February 27, 2017, during an unannounced Case Management inspection when CCLD discovered unsecured knives in the CFH kitchen, accessible to the children. A POC was requested, which required the home to be decertified due to not meeting the required standards. CCLD cleared the required POC on March 13, 2017. DCFS ER investigated an associated referral and deemed the allegation of General Neglect as Inconclusive. OHCIS conducted a supplemental investigation that revealed that other representatives have often found the CFH disorderly and in disarray. The FFA decertified the CFH on March 3, 2017. OHCIS placed the CFH on an indefinite hold on March 21, 2017, not to be used as a placement resource for DCFS placed children.

CCLD cited the FFA on March 14, 2017, during an unannounced Case Management inspection visit, for failing to meet the POC due date. CCLD verified that a condition of the correction of a deficiency cited on February 27, 2017 was not met. A civil penalty of \$50.00 per day was assessed from the period of March 7, 2017 to March 12, 2017 for a total of \$300.00. A POC was requested, which required that the FFA send proof of correction. CCLD cleared the required POC on March 13, 2017.

Recommendations:

The FFA's management shall ensure that:

1. SIRs are submitted timely and accurately reported.
2. The FFA is in full compliance with Title 22 Regulations and free of CCLD citations.

Facility and Environment

- Children's bedrooms were not well maintained.

Children's room doors did not fit in their frames and were not properly opening or closing. CAD requested that the FFA immediately repair the children's bedroom doors. The FFA reported completing the door and frame repairs on July 27, 2017.

Children's mattresses were stained, soiled and worn out.

- Adequate perishable and non-perishable food were not maintained.

One of the CFH's had spoiled potatoes, tomatoes, limes, and tangerines. A second CFH had spoiled vegetables in the refrigerator, rotten and molded bananas, and old potatoes growing stumps. CAD requested that the expired and rotten food be immediately discarded.

- Appropriately documented and comprehensive monetary and clothing allowance logs were not maintained.

Eight children did not receive the weekly allowance in the months containing five weeks. Four children in one home were purchasing their hygiene products with their allowance. The FFA repaid all of the children and retrained the CFP.

Six children's monthly clothing allowance logs were not complete. One child's monthly clothing allowance log showed two questionable purchases: an overly expensive pair of flip-flops and women's walking shoes. Several clothing allowance receipt dates did not match the log dates.

The FFA reported that one of its CFPs submitted the wrong receipts and admitted that mistakes were noted and provided additional clothing purchase receipts for the placed children.

Recommendations:

The FFA's management shall ensure that:

3. Children's bedrooms are well maintained.
4. Perishable and non-perishable food is adequately maintained.
5. Comprehensive and appropriately documented weekly monetary and monthly clothing allowances logs are properly maintained.

Maintenance of Required Documentation and Service Delivery

- FFA Social Worker did not obtain or document efforts to obtain the DCFS CSW's authorization to implement the NSPs.

Three children's NSPs did not have the DCFS CSW's approval signature or did not show sufficient documented efforts to obtain the DCFS CSW's approval signature.

- FFA Social Worker did not develop comprehensive Initial NSPs.

An SIR was not reported in the child's Initial NSP. A child's Initial NSP reported that the child had special dietary needs/food allergies. The FFA confirmed that the information was erroneously documented in the child's NSP.

A child's Initial NSP did not report the correct name of the child.

- FFA Social Worker did not develop comprehensive Updated NSPs.

Two children's Updated NSPs did not report SIRs.

Recommendations:

The FFA's management shall ensure that:

6. FFA Social Worker obtains or documents efforts to obtain CSW's authorization to implement NSPs.
7. FFA Social Worker develops comprehensive Initial NSPs.
8. FFA Social Worker develops comprehensive Updated NSPs.

Personal Needs/Survival and Economic Well-Being

- CFPs do not encourage or assist children to update a Life Book.

Three children did not have a Life Book to capture their important activities and/or accomplishments.

Recommendation:

The FFA's management shall ensure that:

9. CFPs will encourage or assist children to update a Life Book provided by the FFA.

**PRIOR YEAR FOLLOW-UP FROM THE DCFS CAD'S FFA CONTRACT COMPLIANCE
REVIEW**

CAD's last compliance report dated June 30, 2017 (review conducted in June 2016), identified 13 recommendations.

Results:

Based on the results of the current review, the FFA fully implemented 5 of 13 previous recommendations for which the FFA was to ensure that:

- The exterior and grounds are well maintained.
- CFPs participate in the development of NSPs.
- Children are progressing towards meeting the NSPs goals.
- Children are involved in the selection of their clothing.
- Children are provided weekly monetary allowances.

Based on the results of the current review, the FFA did not implement 8 of 13 recommendations for which the FFA was to ensure that:

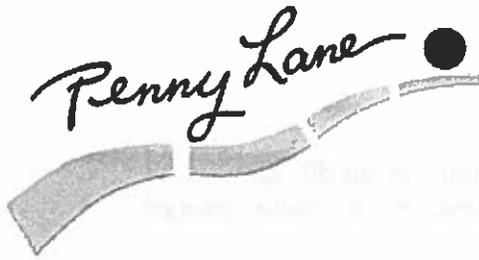
- All SIRs are submitted timely and cross-reported.
- The FFA is in full compliance with Title 22 Regulations and free of CCLD citations.
- Children's bedrooms are well maintained.
- Adequate perishable and non-perishable food is maintained.
- Money and clothing allowance logs are maintained.
- FFA Social Workers develop timely comprehensive Initial NSPs.
- FFA Social Workers develop timely and comprehensive Updated NSPs.
- Encouragement and assistance with a Life Book is provided.

Recommendation:

The FFA's management shall ensure that:

10. The outstanding recommendations from the prior report noted in this report as recommendation numbers 1, 2, 3, 4, 5, 7, 8, and 9 are fully implemented.

At the exit conference, the FFA representatives expressed their desire to remain in compliance with Title 22 Regulations and contract requirements. The FFA will consult with the OHCMD for additional support and technical assistance, and CAD will assess contract compliance during the next review.



Foster / Adoption Families

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Ivelise Markovits, MFCC

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Department of Children and Family Services,
Contracts Administration Division –
Contracts Compliance Section,
3530 Wilshire Boulevard, 5th floor, Cubicle #402
Los Angeles, California 90010,

August 31, 2017

Regarding: Monitoring Review Corrective Action Plan - Addendum

Dear Ms. Tribble

1) Licensing/Contract Requirements Section

#2 – Are special incident reports (SIRs) appropriately documented and cross-reported?

a. The Compliance Review identified 3 SIRs that were submitted 2 days late. In order to ensure that all SIRs are appropriately documented, cross reported and submitted timely Penny Lane Centers has implemented the following:

- i. Penny Lane Social Workers will enter the SIR on the same day that Resource Parent provides incident data. The SIR will be submitted on this same day, even if information may be missing or is pending.
- ii. Once all details are obtained, an addendum will be completed and submitted into the I-track system.
- iii. A training and review for Penny Lane social workers and supervisors will be conducted at each Penny Lane FFA Facility during the months of September and October, 2017.

#4 - Free of substantiated Community Care Licensing (CCL) complaints.

- a. Each CCL citation was addressed in an individual corrective action plan and submitted to CCL after the investigative findings were presented. To ensure future compliance and prevent any new citations, Penny Lane Centers has implemented training on Title XXII compliance for Social Workers and Resource Parents which will be conducted throughout October 2017. This training will be conducted via a Question of the Month (See attached) that focuses on meeting home standards and policies to prevent Community Care Licensing substantiated citations. Every Social Worker is responsible for delivering and reviewing each Question of the Month with their assigned

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Founded in 1969, Penny Lane is a 501 (c) (3) non-profit organization serving abused, abandoned and neglected children with Foster Care, Adoption Services, Residential Treatment, Mental Health, Transitional Housing, and Educational Services.

Penny Lane's mission is to foster hopes and dreams by empowering children, youth and families to reach their highest potential

- families, which provides the families with ongoing training credit. Copies of each Question of the Month are signed and maintained in the foster parent records.
- b. Penny Lane Centers uses Foster Track which is a database that tracks all trainings completed by foster families. As part of the annual recertification, a review is conducted to ensure that all training requirements have been met, including Personal Rights, Supervision, Child Development, LGBTQ and Appropriate Discipline and Title 22.
 - c. Penny Lane has implemented the Parent Training Academy which will include training on Incident Reporting Requirements for foster and adoptive families. These training will occur quarterly as needed throughout the year for foster and adoptive families. See attached Parent Training Academy classes for the next two quarters through December 2017. This calendar outlines trainings on Children's Personal Rights and Title 22 standards to be held on September 23rd 2017 as well as Appropriate Discipline and Supervision to be held on October 28th, 2017 which includes Serious Incident Reporting, supervision expectation and home safety standards.
 - d. Penny Lane Social Workers and Administrative Staff are trained during weekly staff meetings which occur on Mondays from 10 am to 12pm. During these weekly staff meetings trainings are conducted to prepare staff for meeting the needs of each family and ensuring compliance. On Monday, August 28th, 2018 a training was conducted for social workers and administrative staff on weekly allowance, monthly clothing allowance and SIR submission and documentation. Every social worker signed and acknowledged the completion of the training. See form Staff In-Service Training attached.

2) Section III - Facility and Environment

- a. #22 - Are children's bedrooms well maintained.
 - i. Children's room door was corrected and now opens and closes with ease. Two new mattresses were purchased to replace the stained/worn mattresses that were identified during the review.
 - ii. Penny Lane Centers Corrective Action Plan is to conduct a monthly home inspection that includes, among other things, a thorough check of each door as well as each mattress within every foster family and adoption home.
 - iii. During the month of September, a review of Title 22 policies, standards and expectations will be conducted with all Penny Lane Social Workers.
 - iv. The Parent Training Academy will conduct annual and as needed trainings on Title XXII and home compliance standards. All foster parents are required to attend these trainings annually.

- v. All foster family homes receive an annual recertification home inspection conducted by a Supervisor or Quality Assurance Specialist. Homes that do not meet compliance standards are placed on an agency hold until all standards have been met.

#24 – Does the certified foster home maintain adequate nutritious perishable and non-perishable foods to adhere to product “used by,” “sell by,” or expiration dates?

- b. Penny Lane will ensure ongoing support of all FFA Homes by inspecting perishable and non-perishable foods, using the Home Inspection checklist (See attached Home Inspection Form), on a monthly basis. This checklist is reviewed and approved by the Supervisor to ensure compliance. In addition, each home is inspected on an annual basis by a Supervisor or Quality Assurance Specialist on an annual basis, as a part of the families recertification compliance review. Any identified expired foods will be removed from use and documented as part of the families recertification and assessment plan.

#26 – Are appropriate and comprehensive monetary and clothing allowance logs maintained?

- c. To ensure compliance, the weekly allowance sheet was modified to include all of the following:
 - i. Penny Lane Social Workers visit every child on a weekly basis in the foster home for the first three months. After the first three months, visits continue to be weekly however, every other week may occur outside of the home. Each month, Penny Lane social workers collect and review the weekly allowance sheet, monthly clothing sheet, emergency disaster drill, Blue medical sheet, clothing inventory and home inspections forms.
 - ii. It will now be the responsibility of the Supervisor to verify and randomly spot check weekly clothing allowance sheets to ensure compliance of standards and expectations by each family.
 - iii. In order to ensure that all future 5 week months of weekly allowance are accounted for, families are required to provide allowances on a set given day of each week. The weekly allowance form was modified to include the actual date that the allowance is provided and a note was added to remind families and social workers to attend to the 5th week of the month when applicable.
 - iv. The minor will now write in their savings or spending goals.
 - v. A note on the weekly allowance sheet was added to indicate that youth are no longer permitted to use their allowance on the purchase of personal hygiene products. It is the responsibility of the foster parent to provide the personal hygiene items.
 - vi. All families will be trained on the weekly allowance requirements through the Question of the Month training system. This training includes the fact that children are not required to spend their allowance

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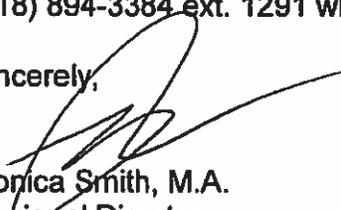
families. These training will occur quarterly as needed throughout the year for foster and adoptive families. A training was conducted on Life book standards and expectations during the month of August 2016 via a Question of the month (See attached) and an in call training was held for all families on April 8th, 2017. Penny Lane intends to conduct another training via the Question of the Month during the month of December 2017.

- g. Social Workers inspect each child's lifebooks on a quarterly basis following the Home Inspection Checklist which is also attached. This home inspection checklist ensures that all home safety and Title 22 compliance and standards are met. These inspection checklists are maintained in the foster parent files and are signed by both family, Penny Lane Social Worker and their Supervisor.

Penny Lane Centers is thankful for the support and continued collaborative efforts with the Out of Home Care Division. We strive to provide top quality care by ensuring safety, wellbeing and permanency for all children at all times. All certified foster families receive close supervision and extensive on-going training by highly skilled and well trained Social Workers. Penny Lane believes in providing these supportive services in an open, honesty and collaborative manner.

Please contact Monica Smith, Regional Director and Quality Assurance Manager at (818) 894-3384 ext. 1291 with any questions or concerns.

Sincerely,



Monica Smith, M.A.
Regional Director